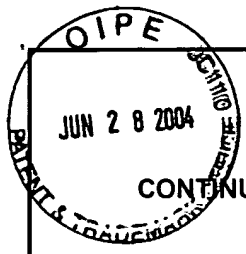


RCE/2177 \$ 61



**REQUEST  
For  
CONTINUED EXAMINATION (RCE)  
TRANSMITTAL**

*Submit an original and a duplicate for fee processing*

Application Number	09/707,462
Filing Date	11/6/2002
First Named Inventor	Gregory Sereda
Examiner Name	Greta Lee Robinson
Group/Art Unit	2177
Attorney Docket ID	Sereda 1999-0043
Express Mail Label no.	

RCE

**1. Submission required under 37 CFR 1.114**

**a. Previously submitted**

- i. ☐ Consider the amendment(s)/reply(ies) under 37 CFR 1.116 previously filed on
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on
- iii. ☐ Other

**b. Enclosed**

- i. ☒ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☒ Other *Drawing w/ marked up copies*

**RECEIVED**

JUL 01 2004

Technology Center 2100

**2. Miscellaneous**

- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months.
- b. ☐ Other

**3. Fees**

- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. **500732 of Henry T. Brendzel**, should a check not be enclosed, or be enclosed but for an incorrect amount.

i. <input checked="" type="checkbox"/> RCE fee Required under 37 CFR 1.17(e)	\$ 740	
iii. <input checked="" type="checkbox"/> Extra Claims fee	\$ 102	
ii. <input type="checkbox"/> Extension of Time fee	\$	
iv. <input type="checkbox"/> Other	\$	
b. <input checked="" type="checkbox"/> Enclosed check in the amount of	\$ 842	

- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

**4. ☒ Please Carry over the prior application's correspondence address.**

**5. ☒ Postcard(s)**

06/30/2004 CNGUYEN 00000023 09707462

**6. ☐ Other:**

03 FC:1999 740.00 OP

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	<b>Henry T. Brendzel</b>	
Signature		Date <b>6/23/04</b>

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail Post Office to Addressee service in an envelop

addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA22313-1450 on this date

**6/24/04**

**Henry Brendzel**

Name of Person Signing

Signature

**6/23/04**

Date

# NOTICE OF FEE DUE

DATE: 06 30 04

TO: RCE

FROM: Office of Initial Patent Examination

SUBJECT: Fee Due

APPLICATION NUMBER: 09707462

A fee is due for the attached document submitted to the U. S. Patent and Trademark Office for the following reason. Please check the application for the appropriate authorization to charge a deposit account. If an authorization is present, please charge the appropriate fee. If an authorization is not present, notify the applicant of the fee deficiency.

- ☐ Insufficient fee by check
- ☐ Insufficient funds in deposit account
- ☐ Declined credit card
- ☐ Non authorization for charge to deposit account
- ☐ No fee submitted per requirement

The correct fee code: 1801 + 1201 amount \$ 770 + 86

The suspended fee code: 1999 amount - \$ 740 - 84

Fee Due amount = \$ 30 + 2

If you have any questions, please contact Cynthia Streater at 703-306-5430 or Eleanor Kurtz at 703-308-3642.

Terminal Operator CA